



Hospital Fiscal Report
 State Form 49520 (R2 /7-02)
 (Form approved by State Board of Accounts, 2000)

Status: Finalized

I. Identification of Organization

Hospital Name: PARKVIEW WHITLEY HOSPITAL

City of Hospital: Columbia City

Year Begin: 01/01/2016 (mm/dd/yyyy format)

Year End: 12/31/2016 (mm/dd/yyyy format)

Person Completing the Report: Lisa Peppler

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Medicare Provider Number: 15-0101

Statement One: Summary of Revenue and Expenses

1. Gross Patient Service Revenue

Inpatient Patient Service Revenue	\$33487884
Outpatient Patient Service Revenue	\$154846029
Total Gross Patient Service Revenue	\$188333913

2. Deductions From Revenue

Contractual Allowance	\$114774458
Other Deductions	\$2623929
Total Deductions	\$117398387

3. Total Operating Revenue

Net Patient Service Revenue	\$70935526
Other Operating Revenue	\$2220880
Total Operating Revenue	\$73156406

4. Operating Expenses

Salaries and Wages	\$16477427	Employee Benefits	\$5219350
Depreciation and Amortization	\$2367092	Interest Expense	\$104518
Bad Debt	\$9581057	Other Expenses	\$31833886
Total Operating Expenses	\$65583330		

5. Net Revenue and Expenses

Excess Revenue over Expenses	\$7573075	Total Assets	\$94855105
Net Non-operating Gains over Loss	\$3374889	Total Liabilities	\$12997466

Total Net Gains	\$10947964
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Statement Two: Contractual Allowance

Revenue Source	Gross Patient Revenue	Contractual Allowance	Net Patient Service Allowance
Medicare	\$67512831	\$54610723	\$12902108
Medicaid	\$38412649	\$34976136	\$3436513
Other Government	\$0	\$0	\$0
Other State	\$0	\$0	\$0
Other Payers	\$82408433	\$27811528	\$54596905
Total	\$188333913	\$117398387	\$70935526

Statement Three: Donations Statement

	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Donations	\$8120	\$137856	\$-129736

Statement Four: Research Statement

	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Research	\$0	\$0	\$0

Statement Five: Education Statement

Education of	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Medical Professionals	\$0	\$25411	\$-25411
Hospital Patients	\$0	\$0	\$0
Community Education	\$9113	\$58659	\$-49546

Number of Medical Professionals Trained	20
Number of Hospital Patients Educated	98472
Number of Citizens Exposed to Health Education Messages	38950

Statement Six: Charity Statement

Hospital Charity Charges	\$3088422
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	Payments from Clients	Less Costs to Hospital	Unreimbursed Costs to Hospital
Charity Care	\$0	\$777962	
HCI Payments	\$0		
Subtotal	\$0	\$777962	\$-777962
Medicaid Shortfalls	\$5405483	\$10236944	
Subtotal	\$5405483	\$11014906	\$-5609423
DSH Payments	\$0		
Subtotal	\$5405483	\$11014906	\$-5609423
Medicare Shortfalls	\$13252510	\$17261966	
Other Government Programs	\$0	\$0	
Total	\$18657993	\$28276872	\$-9618879

Statement Seven: Subsidized Health Services for the Community

	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Community Programs	\$40054	\$77069	\$-37015
Community Assessment	\$0	\$0	\$0
Provision of Taxes	\$0	\$0	\$0
Other Allocations	\$0	\$84182	\$-84182

Comments

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